PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032

Date

Under the Paperwork Reduction	on Act of 199	no persons are requir	ed to re	espond to a collection	n of infor	nation unles	s it displays	valid OMB control number	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known					
				Application Nun	nber	10/516,586		Conf. No.: 9941	
FEE TRANSMITTAL For FY 2009				Filing Date Augu		August 08,			
				First Named Inventor Mas		Masaru NA	saru NAKATANI		
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name BASS, DIRK R					
				Art Unit 1797					
TOTAL AMOUNT OF PAY	MENT (\$	) 180.00		Attorney Docker	No.	4991-0157	PUS1		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments  Credit any overpayments									
WARNING: Information on this form may become public, Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	FILING	FEES :		CH FEES	EXAM	MINATION			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity 1 Fee (\$)	Fee	(\$) Fee		Fees Paid (\$)	
Utility	330		540	270	220				
Design	220	110	100	50	140	) 7	0		
Plant	220	110	330	165	170	) 8	5		
Reissue	330	165	540	270	650	32	5		
Provisional	220	110	0	0	(	-	0		
2. EXCESS CLAIM FEES Small Entity									
Fee Description							ee (\$) 52	Fee (\$)	
Each claim over 20 (including Reissues)  Each independent claim over 3 (including Reissues)							220	26 110	
Multiple dependent claims  Multiple dependent claims							390	195	
Total Claims							ultiple Dep	endent Claims	
- 20 or HP = HP = highest number of total		x=		0.00		E	ee (\$)	Fee Paid (\$)	
Indep. Claims	Extra Clair		Fee	Paid (\$)		_			
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer									
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50									
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).  Total Sheets Extra Sheets Number of each additional \$50 or Laction thereof									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): IDS Surcharge									
Otner (e.g., late filing	surcnarge	;); no suichaige						180.00	
SUBMITTED BY A									
Signature Registration No. 28977 Telephone 703-205-8000									

Name (Print/Type) Gerald M Murphy, Jr. Name (Print/Type) Gerald M Murghly, Jr.

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the This collection on information is required by 27 in 11-10. The airmost his required to 6 cent for rebain absorbed by the public which is fall (and by the collection) as a pollucation. Controlled the process of the public which is to life (and by the collection) are districted to complete a pollucation of the public which is to be 10 miles to complete, including against ring, preparing, and submitting the complete applications from the turbing the story of the public which is a submitted to complete and the complete application. The turbing the public which is a submitted to the complete and the complete application. The turbing the public which is a submitted to the complete and the complete applications on the amount of the polluciation and the amount of the public public which is a submitted to the complete and the public which is a public public which are the public pu

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If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2,